JUL 17 2006

AX TRANSMISSION	
TO IDENTIFIER: Application Number 10/584,746	1
TO IDENTIFIER: Application Number 10/584,746 Patent Number nventor: Ursula Ziegler et al.	<u> </u> -
MESSAGE TO: US Patent and Trademark Office FAX NUMBER: (571) 273-8300	
FROM: CONNOLLY BOVE LODGE & HUTZ LLP Ashley I. Pezzner	
PHONE: (302) 658-9141 Attorney Dkt. #: 05587-00409-US	-
PAGES (Including Cover Sheet): 8	_
CONTENTS: Fee Transmittal (1 page) Transmittal Of Combined Declaration And Power Of Attorney (1 page) Combined Declaration And Power Of Attorney (4 pages) Charge \$130.00 to deposit account 03-2775 Certificate of Transmission (1 page)	
If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (302) 658-9141 and send the original transmission to us by re mail at the address below.	
This transmission is intended for the sole use of the individual and entity to who is addressed, and may contain information that is privileged, confidential and is addressed, and may contain information that is privileged, confidential and is addressed, and may contain information that any other applicable law. You are hereby notified that any	m it

exempt from disclosure under applicable law. You are hereby notified that any

dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

CONNOLLY BOVE LODGE & HUTZ LLP

1007 North Orange Street, P.O. Box 2207, Wilmington, Delaware 19899
Telephone: (302) 658-9141 Facsimile: (302) 658-5614

BEST AVAILABLE COPY

Application No. (if known): 10/584,746

Attorney Docket No.: 05587-00409-US

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

Ly 17, 2006

J. Lynn Ferry

Typed or printed name of person signing Certificate

Note:

Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Transmittal Of Combined Declaration And Power Of Attorney (2 pages)

Combined Declaration And Power Of Attorney (4 pages)

Charge \$130.00 to deposit account 03-2775

RECEIVED CENTRAL FAX CENTER

NO. 2279 P. 3/8

JUL 17 2006

PTO/SB/17 (01-98)

Approved for use through 7/31/2008. OM9 0651-0032

U.S. Patent and Trademark Office; U.S. OEPARTMENT OF COMMERCE to a collection of information unless it displays a yard QMB control number.

	U.S. Patent and Trad	nation untees it displays a va	EQ OWR COUNTY HOUSE	
Under the Paperwork Reduction Act of 1985, no person are required to	Co	omplete if Known		
Canadistant Appropriations Act, 2005 (FLC 4010).	Application Number	100304,740		
FEE TRANSMITTAL	Filing Date	June 26, 2006		
LEE INVIOUS CONT.	First Named Inventor	Ursula Zlegler		
For FY 2006	Exeminer Name	Not Yet Assigned		
		N/A		
Applicant claims small entity status. See 37 CFR 1.27	An Unit	05587-00409-US		
TOTAL AMOUNT OF PAYMENT (\$) 130.00	Attorney Docket No.	10000		
METHOD OF PAYMENT (check all that apply) Other (please identify):				
None Utilet (Diess to Line)				
Check Cannolly Bove Loage at 11th Early Name:				
x Deposit Account Deposit Account Number U3-2173 Deposit For the above-Identified deposit account, the Director	r is hereby authorized to:	(check all that apply)		
For the above-Identified deposit account, the Direct	Charge feet	(s) indicated below, exc	ept for the hing ree	
Chame fee(s) indicated below	<u></u>		1	
X Cream any overlayment or				
Charge any additional testing to the Life and 1.17 fee(s) under 37 CFR 1.16 and 1.17	non filing or may be s	subject to a surcha	(ge.)	
Charge any adultant to the feet of the fee			}	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES	SEARCH FEES EX	(AMINATION FEES Small Entity	l l	
Small Entity	Small Entity	96 (\$) Fee (\$)	Fees Paid (\$)	
Fee (\$) Fee (\$)	9 191	200 100		
T/615p. 300	500 250	130 65		
200 100	100 30	160 80		
700 100	300 150	600 300		
Plant 300 150	500 250	0 0		
Reissue 100	0	Ų J	Small Entity	
Provisional			Fec (\$) Fee (5)	
2. EXCESS CLAIM FEES			50 25	
Fee Description Each claim over 20 (including Reissues)			200 100	
Each independent claim over 3 (including Reissucs)			360 180	
Multiple dependent claims		Multiple Depend	ent Claims	
Total Claims Extra Claims Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)	
1040 43-504 X				
HP = highest number of total claims paid for, if greater than 20.	Fee Paid (\$)			
Indep. Claims Extra Claims Fee (\$)	Fee Paid (\$)			
	1			
of interest claims paid for, it greater than	J.		•	
		nically filed sequence	or computer	
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets o listings under 37 CFR 1.52(e)), the application siz	fee due is \$250 (\$125 fo	or small entity) for each	SOUTHOUR SO	
listings under 37 CFR 1.32(7), as (1.52)	(3) and 37 CFR 1.10(5)		Fee Pald (\$)	
sheets or fraction tricred. Shorts Number	of each additional 50 or frac (round up to a who	tion thereor		
10131 0110419	Fees Paid (\$)			
100				
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 130.00				
Non-English Specification, \$130 fee (no small of Other (e.g., late filing surcharge): 1051 Surcharge	e-Late oath or declara	tion		
Other (6.g., 1816 Hung suream gay)			1000 CEO 0441	
SUBMITTED BY	A / Registration No.	35,646 Telephone	(302) 658-9141	
Signature Stability Office Name (Print/Type) Ashley I. Pezzrier	(Adomey/Agent)	Date	7/17/06_	

478700_1

Application No.: 10/584,746

Docket No.: 05587-00409-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED CENTRAL FAX CENTER

In re Patent Application of:

Ursula Ziegler et al.

JUL 17 2006

Confirmation No.: N/A

Application No.: 10/584,746

Filed: June 26, 2006 For: COMPOSITE BODIES, METHOD FOR THE

PRODUCTION THEREOF AND USE

THEREOF

Art Unit: N/A

Examiner: Not Yet Assigned

TRANSMITTAL OF COMBINED DECLARATION AND POWER OF ATTORNEY

MS PCT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicant submits herewith the executed Combined Declaration And Power Of Attorney. Applicant has not received a Notification Of Missing Requirements.

Please charge our Deposit Account No. 03-2775 in the amount of \$130.00 covering the required fees.. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 05587-00409-US.

Respectfully subspitted

Ву Ashley I. Pezzner

Registration No.: 35,646 CONNOLLY BOVE LODGE & HUTZ LLP

1007 North Orange Street

P.O. Box 2207

Wilmington, Delaware 19899

(302) 658-9141

Attorney for Applicant

07/18/2006 ZJUHAR1 00000131 032775 10584748

01 FC:1051

130.00 DA

476631_1